

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51			
2							52			
3							53			
4							54			
5							55			
6							56			
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32							82			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50	/						100			
TOTAL IND.							TOTAL IND.			
TOTAL DEP.							TOTAL DEP.			
TOTAL CLAIMS							TOTAL CLAIMS			
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS										